

FEE CALCULATION SHEET  
(FOR USE WITH FORM PT-57)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	INO.	DEF.	INO.	DEF.	INO.	DEF.
1						
2						
3						
4						
5						
6						
7						
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42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL	2					
TOTAL	20					
PTAL	22					

	1st AMENDMENT		2nd AMENDMENT		3rd AMENDMENT	
	INO.	DEF.	INO.	DEF.	INO.	DEF.
61						
62						
63						
64						
65						
66						
67						
68						
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86						
87						
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92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL						
TOTAL						
TOTAL						
TOTAL						

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO. **09/529448**

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/				51						
2		/		/			52						
3		/		/			53						
4		/		/			54						
5		/		/			55						
6		2		/			56						
7		/		/			57						
8		/		/			58						
9		/		/			59						
10		/		/			60						
11		0		/			61						
12		0		/			62						
13		0		/			63						
14		0		/			64						
15		0		/			65						
16	/		/				66						
17		0		/			67						
18		0		/			68						
19		0		/			69						
20		0		/			70						
21		0		/			71						
22		0		/			72						
23							73						
24							74						
25							75						
26							76						
27							77						
28							78						
29							79						
30							80						
31							81						
32							82						
33							83						
34							84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	2		2				TOTAL IND.						
TOTAL DEP.	21		20				TOTAL DEP.						
TOTAL CLAIMS	23		22				TOTAL CLAIMS						